

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		FEC IDENTIFICATION NUMBER ▼ C C00530766	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div>	

Full Name of Payee Headway Workforce Solutions Inc.		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">21</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2020</div>	
Mailing Address 3100 Smoketree Ct. Suite 900		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">5000.00</div>	
City Raleigh	State NC	Zip Code 27604	Transaction ID : SE.16646
Purpose of Expenditure Canvassing (estimate)	Category/Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">21</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2020</div>	
Name of Federal Candidate KULKARNI, SRI PRESTON, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee i360		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">21</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2020</div>	
Mailing Address P.O. Box 37046		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">375.00</div>	
City Baltimore	State MD	Zip Code 21297-3046	Transaction ID : SE.16647
Purpose of Expenditure Dialer Access (estimate)	Category/Type	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">21</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px;">2020</div>	
Name of Federal Candidate KULKARNI, SRI PRESTON, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5375.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	5375.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gross, Jennifer, , ,

[Electronically Filed]

Date

05

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22

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2020

Signature